2019 Income and Discount Eligiblity Tables (5 levels)

Annual Maximum Income					
Household Size	FPL 0-100%	FPL 101-150%	FPL 151-175%	FPL 176-200%	FPL >200%
1	\$12,490	\$18,735	\$21,858	\$24,980	N/A
2	\$16,910	\$25,365	\$29,593	\$33,820	N/A
3	\$21,330	\$31,995	\$37,328	\$42,660	N/A
4	\$25,750	\$38,625	\$45,063	\$51,500	N/A
5	\$30,170	\$45,255	\$52,798	\$60,340	N/A
6	\$34,590	\$51,885	\$60,533	\$69,180	N/A
7	\$39,010	\$58,515	\$68,268	\$78,020	N/A
8	\$43,430	\$65,145	\$76,003	\$86,860	N/A
For each					
additional person add	\$4,420	\$6,630	\$7,735	\$8,840	N/A

Monthly Maximum Income					
Household Size	FPL 0-100%	FPL 101-150%	FPL 151-175%	FPL 176-200%	FPL >200%
1	\$1,041	\$1,561	\$1,821	\$2,082	N/A
2	\$1,409	\$2,114	\$2,466	\$2,818	N/A
3	\$1,778	\$2,666	\$3,111	\$3,555	N/A
4	\$2,146	\$3,219	\$3,755	\$4,292	N/A
5	\$2,514	\$3,771	\$4,400	\$5,028	N/A
6	\$2,883	\$4,324	\$5,044	\$5,765	N/A
7	\$3,251	\$4,876	\$5,689	\$6,502	N/A
8	\$3,619	\$5,429	\$6,334	\$7,238	N/A
For each additional person add	\$368	\$553	\$645	\$737	N/A

Weekly Maximum Income					
Household Size	FPL 0-100%	FPL 101-150%	FPL 151-175%	FPL 176-200%	FPL >200%
1	\$240	\$360	\$420	\$480	N/A
2	\$325	\$488	\$569	\$650	N/A
3	\$410	\$615	\$718	\$820	N/A
4	\$495	\$743	\$867	\$990	N/A
5	\$580	\$870	\$1,015	\$1,160	N/A
6	\$665	\$998	\$1,164	\$1,330	N/A
7	\$750	\$1,125	\$1,313	\$1,500	N/A
8	\$835	\$1,253	\$1,462	\$1,670	N/A
For each					
additional person add	\$85	\$128	\$149	\$170	N/A

Source: Federal Register / Vol. 84, No. 22 / Friday, February 1, 2019 / Notices

https://www.federalregister.gov/documents/2019/02/01/2019-00621/annual-update-of-the-hhs-poverty-guidelines Calculated monthly and weekly wages are for determining eligibility for programs or for fee reductions based on family income in the Kansas Statewide Farmworker Program.

The following table provides an example of a sliding fee schedule.

KSFHP SLIDING FEE SCHEDULE						
Services FPL 0-100% FPL 101-150% FPL 102-5% FPL 176-200% FPL >200%						
Fees for Services at Clinics value Scale						
Primary Care and Behavioral Health Office Visit	\$10		\$20	\$25	No voucher coverage	